

**FILED**  
UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS

SEP 20 2017

JEFFREY P. ALLSTEADT, CLERK  
INTAKE 2

☐ Check if this is an amended filing

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known):

Chapter you are filing under:

- ☐ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☒ Chapter 13

Official Form 101

**Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**About Debtor 1:**

Neethoach

First name

Yisrael

Middle name

Duhant

Last name

Suffix (Sr., Jr., II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

XXX - XX - 8126

OR

9 XX - XX - \_\_\_\_\_

XXX - XX - \_\_\_\_\_

OR

9 XX - XX - \_\_\_\_\_

Debtor 1

Neekloach Yisreal Duhart  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and doing business as names

☐ I have not used any business names or EINs.

Business name \_\_\_\_\_

Business name \_\_\_\_\_

EIN \_\_\_\_\_

EIN \_\_\_\_\_

☐ I have not used any business names or EINs.

Business name \_\_\_\_\_

Business name \_\_\_\_\_

EIN \_\_\_\_\_

EIN \_\_\_\_\_

**5. Where you live**

**If Debtor 2 lives at a different address:**

3350 Western Ave

Number Street

Park Forest IL 60466

City State ZIP Code

Cook

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

3350 Western Ave

Number Street

P.O. Box \_\_\_\_\_

Park Forest IL 60466

City State ZIP Code

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box \_\_\_\_\_

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

Debtor 1 Nackheuch y Duhart  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☐ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☒ Chapter 13

**8. How you will pay the fee**

- ☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

☐ No

☒ Yes.

District Northern IL When 02-14-17 Case number 17B4242  
MM / DD / YYYY  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

☐ No

☐ Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY  
Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

**11. Do you rent your residence?**

☒ No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☐ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Neekhaach y Dhawnt  
First Name Middle Name Last Name

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☒ No

☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1

Naekheach Y Dhat  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
- Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.
- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:
- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
- Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.
- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:
- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Neelkhan Y Dhant  
First Name Middle Name Last Name

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?

16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☒ No. Go to line 16b.  
☐ Yes. Go to line 17.

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☒ No. Go to line 16c.  
☐ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

☒ No. I am not filing under Chapter 7. Go to line 18.

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No  
☐ Yes

18. How many creditors do you estimate that you owe?

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1-49               | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99              | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999            |  |  |

19. How much do you estimate your assets to be worth?

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

20. How much do you estimate your liabilities to be?

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000          | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000    | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000   | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**Part 7: Sign Below**

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

x

Signature of Debtor 1

Executed on 9-20-17  
MM / DD / YYYY

x

Signature of Debtor 2

Executed on 9-20-2017  
MM / DD / YYYY

Debtor 1

Neefchoach Y Dhart  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

x [Signature]  
Signature of Attorney for Debtor

Date

MM / DD / YYYY

Neefchoach Y Dhart  
Printed name

Pro Se  
Firm name

Firm name

3350 Western Ave  
Number Street

Parlo Porrest  
City

IL  
State

60466  
ZIP Code

Contact phone 773-887-1211

Email address Dhart10@yahoo.com

N/A  
Bar number

N/A  
State

Debtor 1

Neekhoach 1 Dhar  
First Name Middle Name Last Name

Case number (if known)

**For you if you are filing this bankruptcy without an attorney**

**If you are represented by an attorney, you do not need to file this page.**

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

- ☐ No  
☐ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

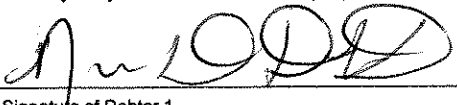
- ☐ No  
☐ Yes

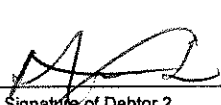
Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

- ☐ No  
☐ Yes. Name of Person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

x   
Signature of Debtor 1

x   
Signature of Debtor 2

Date 09-20-17  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

Contact phone 773-837-1211

Contact phone \_\_\_\_\_

Cell phone 773-837-1211

Cell phone \_\_\_\_\_

Email address Dhar10@yahoo.com

Email address \_\_\_\_\_

B6D (Official Form 6D) (12/07)

In re **Neekhoach N Duhart**

Debtor

Case No. \_\_\_\_\_

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule J - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R  H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			Title Loan					
US Payday Loans 8127 South Cicero Chicago, IL 60652			2004 Pontiac Grand Prix					
Value \$			7,875.00				1,000.00	0.00
Account No.								
Value \$								
Account No.								
Value \$								
Account No.								
Value \$								
Subtotal (Total of this page)							1,000.00	0.00
Total (Report on Summary of Schedules)							1,000.00	0.00

0 continuation sheets attached

Case No.

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

**8** continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Neekhoach N Duhart**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER (See instructions above.)	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	UN DIS PUTED		AMOUNT OF CLAIM
			CONT INGENT	ED	
Account No.  <b>Christ Hospital</b> <b>4440 W. 95th st.</b> <b>Oak Lawn, IL 60453</b>	-	<b>Medical Bill</b>			<b>1,000.00</b>
Account No.  <b>city of chicago parking</b> <b>121 N Lasalle Street ROOM 107A</b> <b>Chicago, IL 60602</b>	-	<b>Parking Tickets</b>			<b>7,000.00</b>
Account No. xxxxx14N1  <b>Collect Sys</b> <b>8 South Michigan Suite 618</b> <b>Chicago, IL 60603</b>	-	<b>Opened 12/01/11 Last Active 7/01/12</b> <b>Medical</b>			<b>1,271.00</b>
Account No. xxxxx15N1  <b>Collect Sys</b> <b>8 South Michigan Suite 618</b> <b>Chicago, IL 60603</b>	-	<b>Opened 3/01/12 Last Active 10/01/12</b> <b>Medical</b>			<b>394.00</b>
Account No. xxxxx07N1  <b>Collect Sys</b> <b>8 South Michigan Suite 618</b> <b>Chicago, IL 60603</b>	-	<b>Opened 3/01/12 Last Active 9/01/12</b> <b>Medical</b>			<b>394.00</b>
<b>Subtotal</b> (Total of this page)					<b>10,059.00</b>

Sheet no. 1 of 8 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

ND

In re **Neekhoach N Duhart**

Case No. \_\_\_\_\_

Debtor

# **SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS** (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B I T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>xxxxx51N1</b>  <b>Collect Sys</b> <b>8 South Michigan Suite 618</b> <b>Chicago, IL 60603</b>			<b>Opened 2/01/12 Last Active 7/01/12</b> <b>Medical</b>				<b>394.00</b>
Account No.  <b>ComEd</b> <b>3 Lincoln Center</b> <b>Attn: Bankruptcy Section</b> <b>Oakbrook Terrace, IL 60181</b>			<b>Electric Bill</b>				<b>1,500.00</b>
Account No. <b>xxxxx5820</b>  <b>Convergent Outsourcing</b> <b>800 Sw 39th St</b> <b>Renton, WA 98057</b>			<b>Opened 6/10/10</b> <b>Collection Sprint</b>				<b>720.00</b>
Account No. <b>xxxxx9668</b>  <b>Credit Management Lp</b> <b>4200 International Pkwy</b> <b>Carrollton, TX 75007</b>			<b>Opened 1/12/12 Last Active 2/01/12</b> <b>Collection Comcast - Chicago</b>				<b>1,352.00</b>
Account No. <b>xxxxx5800</b>  <b>Diversified Adjustment</b> <b>600 Coon Rapids Blvd Nw</b> <b>Coon Rapids, MN 55433</b>			<b>Opened 5/06/12 Last Active 6/01/12</b> <b>Collection Us Cellular</b>				<b>673.00</b>
Subtotal (Total of this page)							<b>4,639.00</b>

Sheet no. 2 of 8 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

BoF (Official Form 6F) (12/07) - Cont.

ND

In re **Neekhoach N Duhart**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B I T O R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I T A T E D	D I S P U T E D	A M O U N T O F C L A I M
Account No. xxxxxxxxxxxxxxx0090  Dpt Ed/Sim Po Box 9635 Wilkes Barre, PA 18773			Opened 1/08/09 Last Active 10/01/12 Educational				7,520.00
Account No. xxxxxxxxxxxxxxx0090  Dpt Ed/Sim Po Box 9635 Wilkes Barre, PA 18773			Opened 7/27/09 Last Active 10/01/12 Educational				3,665.00
Account No. xxxxxxxxxxxxxxx0090  Dpt Ed/Sim Po Box 9635 Wilkes Barre, PA 18773			Opened 1/08/09 Last Active 10/01/12 Educational				3,500.00
Account No. xxxxxxxxxxxxxxx0090  Dpt Ed/Sim Po Box 9635 Wilkes Barre, PA 18773			Opened 9/16/09 Last Active 10/01/12 Educational				1,750.00
Account No. xxxxxxxxxxxxxxx0110  Dpt Ed/Sim Po Box 9635 Wilkes Barre, PA 18773			Opened 1/19/11 Last Active 10/01/12 Educational				1,750.00
Subtotal (Total of this page)							16,185.00

Sheet no. 3 of 8 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

ND

In re **Neekhoach N Duhart**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	H U S B A N D / W I F E / J O I N T / C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N D I S P U T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxx0110  Dpt Ed/Slm Po Box 9635 Wilkes Barre, PA 18773			Opened 1/19/11 Last Active 10/01/12 Educational				1,419.00
Account No. xxxxxxxxxxxxxxx0001  Edfl Svcs/dapp 120 N Seven Oaks Dr Knoxville, TN 37922			Opened 11/29/04 Last Active 10/01/12 Educational				2,751.00
Account No. xxxxxxxxxxxxxxx5475  First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104			Opened 8/17/11 Last Active 10/01/11 CreditCard				400.00
Account No. xxx4642  Futre Financ 16859 S Ridgeland Suite D Oak Forest, IL 60452			Opened 3/13/09 Last Active 10/15/10 Automobile				2,662.00
Account No. xxx2504  Helvey & Associates 1015 E Center St Warsaw, IN 46580			Opened 9/14/11 Last Active 3/01/12 Returned Check Kroger Check Recovery Center				173.00
Subtotal (Total of this page)							7,405.00

Sheet no. 4 of 8 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Document Page 15 of 27  
 Document Page 17 of 28  
 Document Page 25 of 28  
 Document Page 27 of 28

B6F (Official Form 6F) (12/07) - Cont.

In re Neekhoach N Duhart

Case No. \_\_\_\_\_

Debtor

# **SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	U N L I Q U I T E D C L A I M S	D I S P U T E D C L A I M S	AMOUNT OF CLAIM
Account No.  IL Dept of Unemployment Security Attn: Benefit Repayment Collection PO BOX 19286 Springfield, IL 62794			Overpayment of Benefits			17,000.00
Account No. xxxxxxxxxxxx8173  Lvnv Funding Llc Po Box 740281 Houston, TX 77274			Opened 9/23/11 Last Active 1/01/08 FactoringCompanyAccount Cortrust Cortrust Bank N.A.			654.00
Account No. xxxx1110  Nco Financial Systems, 600 Holiday Plaza Dr Ste Matteson, IL 60443			Opened 7/12/12 Last Active 10/01/12 Collection Illinois State Toll Hwy Author			645.00
Account No.  Peoples Gas c/o Bankruptcy Department 130 E. Randolph Drive Chicago, IL 60602			Gas Bill			1,500.00
Account No.  PLS Loan Store 9902 W. Western Ave. Chicago, IL 60643			Payday Loan			1,000.00
Subtotal (Total of this page)						20,799.00

Sheet no. 5 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Document Page 16 of 27  
 Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:08:09 Desc Main

Document Page 18 of 28  
 Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:08:09 Desc Main

B6F (Official Form 6F) (12/07) - Cont.

In re Neekhoach N Duhart

Case No. \_\_\_\_\_

Debtor

# **SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T			A M O U N T O F C L A I M
			U N L I Q U I T E D	D I S P U T E D		
Account No. xxx6062  Professnl Acct Mgmt In 633 W Wisconsin Ave Ste Milwaukee, WI 53203	-	Opened 7/09/10 Last Active 9/01/10 Collection Tcf Bank				77.00
Account No. xxxxxxxxx6091  Rent Recover, Llc (Original Creditor:Jef 729 N Route 83 #320 Bensenville, IL 60106	-	Opened 2/11/10 Last Active 11/01/12 Collection Jeffery Apartme				2,482.00
Account No. xxxxxxx3418  Rjm Acq Llc 575 Underhill Blvd Ste 2 Syosset, NY 11791	-	Opened 10/19/10 Last Active 9/01/12 FactoringCompanyAccount Bank Of America Checking Accou				417.00
Account No. xxxxxxxxxxxxxxxxxxx1009  Sallie Mae Po Box 9500 Wilkes Barre, PA 18773	-	Opened 10/09/03 Last Active 10/01/12 Educational				1,165.00
Account No. xxxxxxxxxxxxxxxxxxx1009  Sallie Mae Po Box 9500 Wilkes Barre, PA 18773	-	Opened 10/09/03 Last Active 10/01/12 Educational				315.00
Subtotal (Total of this page)						4,456.00

Sheet no. 6 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

In re **Neekhoach N Duhart**

Case No. \_\_\_\_\_

Debtor

# **SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS** (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx0004  Simmons Fnb Pob 7009 Pine Bluff, AR 71611			Opened 1/26/07 Last Active 10/01/12 Educational				5,522.00
Account No. xxxxxxxxxxxx0002  Simmons Fnb Pob 7009 Pine Bluff, AR 71611			Opened 12/09/05 Last Active 10/01/12 Educational				5,004.00
Account No. xxxxxxxxxxxx0001  Simmons Fnb Pob 7009 Pine Bluff, AR 71611			Opened 12/09/05 Last Active 10/01/12 Educational				2,625.00
Account No. xxxxxxxxxxxx0003  Simmons Fnb Pob 7009 Pine Bluff, AR 71611			Opened 1/26/07 Last Active 10/01/12 Educational				2,625.00
Account No.  Stroger Hospital 1969 W Ogden Ave Chicago, IL 60612			Medical Bill				700.00
Subtotal (Total of this page)							16,476.00

Sheet no 7 of 8 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

ND

In re Neekhoach N Duhart

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	H W J C C O D E D E B T O R	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxx90N1  Untd Res Sys (Original Creditor: Medical) 10075 W Colfax Ave Lakewood, CO 80215			Opened 5/01/12 Last Active 9/01/12 Collection Medical			777.00
Account No.						
Account No.						
Account No.						
Account No.						
Account No.						
Subtotal (Total of this page)						777.00
Total (Report on Summary of Schedules)						85,013.00

Sheet no. 8 of 8 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

ND

ADT Security Services  
PO Box 551200  
Jacksonville, FL 32255

AT&T Mobility  
One AT&T Way  
Room 3A104  
Bedminster, NJ 07921

Bank Of America  
PO Box 15726  
Wilmington, DE 19886

Cavalry SPV  
500 Summit Lake Dr  
Ste 400  
Valhalla, NY 10595

City of Chicago Dept of Revenue  
c/o Arnold Scott Harris  
111 W Jackson, Suite 600  
Chicago, IL 60604

Comcast Cable  
PO Box 3002  
Southeastern, PA 19398

ComEd  
PO Box 6111  
Carol Stream, IL 60197

Edfinancial Services  
10 Turtle Creek Lane  
Little Rock, AR 72202

Future Finance Company  
c/o Gordon & Centracchio  
211 W Wacker Suite 500  
Chicago, IL 60606

Illinois Dept of Employment Sec  
20 Box 4385  
Chicago, IL 60680

ain

Diversified Adjustment  
600 Coon Rapids Blvd NW  
Coon Rapids, MN 55433

Dpt Ed/Slm  
Po Box 9635  
Wilkes Barre, PA 18773

Edfl Svcs/Idapp  
120 N Seven Oaks Dr  
Knoxville, TN 37922

First Premier Bank  
601 S Minnesota Ave  
Sioux Falls, SD 57104

Futre Financ  
15859 S Ridgeland Suite D  
Oak Forest, IL 60452

Harris and Harris  
222 Merchandise Mart Plaza  
Suite 1900  
Chicago, IL 60654

Helvey & Associates  
1015 E Center St  
Warsaw, IN 46580

IL Dept of Employment Security  
33 S. State Street  
8th Floor  
Chicago, IL 60603

IL Dept of Unemployment Security  
Attn: Benefit Repayment Collection  
PO BOX 19286  
Springfield, IL 62794

Illinois Tollway  
Attn: Legal Dept  
2700 Ogden Ave  
Downers Grove, IL 60515

~~Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:08:09 Desc Main~~  
~~Document Page 21 of 27~~  
~~Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:08:09 Desc Main~~  
~~Document Page 23 of 28~~  
~~Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:08:09 Desc Main~~  
~~Document Page 15 of 28~~

ND

Sprint Nextel  
PO Box 7949  
Overland Park, KS 66207

T-Mobile  
Bankruptcy Department  
PO Box 53410  
Bellevue, WA 98015

Title Lenders  
d/b/a USA Payday Loans  
8127 So. Cicero  
Chicago, IL 60652

University of Arkansas at Pine Bluff  
1200 University Dr  
Pine Bluff, AR 71601

US Bank  
800 Nicollet Mall  
Minneapolis, MN 55402

Verizon Wireless  
Bankruptcy Department  
PO Box 3397  
Bloomington, IL 61702

Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:08:09 Desc Main  
Document Page 22 of 27  
Document Page 24 of 28  
Document Page 14 of 28  
Main

NA

Illinois Dept. of Human Services  
PO Box 19407  
Springfield, IL 62794

Illinois Tollway  
2700 Ogden Ave  
Downers Grove, IL 60515

IRS  
Special Procedures - Insolvency  
PO Box 7346  
Philadelphia, PA 19101

Jefferson Capital Systems LLC  
16 McLeland Road  
Saint Cloud, MN 56303

Katherine Knazze  
1335 S. Prairie  
Chicago, IL 60605

Orion  
c/o Recovery Management Systems Cor  
25 SE 2nd Ave, Suite 1120  
Miami, FL 33131

Payday Loan Store of Indiana  
800 Jorie Blvd, 2nd Floor  
Oak Brook, IL 60523

People's Gas  
401 S State St  
Chicago, IL 60697

Phylicia Renee Jackson  
8037 S. Clyde  
Chicago, IL 60617

Premier BankCard/Charter  
po box 2208  
Vacaville, CA 95696

Quantum3 Group LLC  
PO Box 788  
Kirkland, WA 98083-0788

Credit Management Lp  
4200 International Pkwy  
Carrollton, TX 75007

~~Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:08:09 Desc Main~~  
~~Document Page 24 of 27~~  
~~Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:43:13 Desc Main~~  
~~Document Page 26 of 28~~  
~~Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:43:13 Desc Main~~  
~~Document Page 17 of 28~~  
~~Case 17-28155 Doc 1 Filed 09/20/17 Entered 09/20/17 15:43:13 Desc Main~~  
~~Document Page 17 of 28~~

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Simmons Fnb  
Pob 7009  
Pine Bluff, AR 71611

Stroger Hospital  
1969 W Ogden Ave  
Chicago, IL 60612

Untd Res Sys (Original Creditor:Medical)  
10075 W Colfax Ave  
Lakewood, CO 80215

US Payday Loans  
8127 South Cicero  
Chicago, IL 60652

ND

IRS  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Lvnv Funding Llc  
Po Box 740281  
Houston, TX 77274

Nco Financial Systems,  
600 Holiday Plaza Dr Ste  
Matteson, IL 60443

Peoples Gas  
c/o Bankruptcy Department  
130 E. Randolph Drive  
Chicago, IL 60602

PLS Loan Store  
9902 W. Western Ave.  
Chicago, IL 60643

PLS Loan Store  
2132 E. 71st Street  
Chicago, IL 60649

Professnl Acct Mgmt In  
633 W Wisconsin Ave Ste  
Milwaukee, WI 53203

Rent Recover, Llc (Original Creditor:Jef  
729 N Route 83 #320  
Bensenville, IL 60106

Rjm Acq Llc  
575 Underhill Blvd Ste 2  
Syosset, NY 11791

Ross Kleiman  
PLS Financial Services, Inc  
300 N. Elizabeth, 4th Floor  
Chicago, IL 60607

Sallie Mae  
Po Box 9500  
Wilkes Barre, PA 18773

NO

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS

In Re: Neekhoach Y Dvhart,

Debtor (s)

Case No.

Chapter

## List of Creditors

IL Department of Children and family Services Child support	42,000
Sprint wireless Service	3,000
Verison wireles	2,000
Comcast Network	3,000
T Mobile Service	1,200

IL Departement of unemployment Insurance	14,000
City of Chicago Department of Revenue	23,000
Internal Revenue service	3,000
Secretary of State Jesse white	6,000
City of Chicago IL Depart ment of Revenue 400 w Superior chi IL	28,000
IL Department of Children and Family Services Springfield IL	15,000